

CLAIMS ONLY							Application Number 10605889	Filing Date			
							Applicant(s)				
							* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend
1	I						51				
2	I						52				
3	I						53				
4	I						54				
5	I						55				
6	I						56				
7	I						57				
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39							89				
40							90				
41							91				
42							92				
43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
Total Indep	4						Total Indep				
Total Depend	30						Total Depend				
10							11				
Claim No.	30						Claim No.				